



Agreement Number _____
Task Order Number _____

This certifies that payment was received on _____ in the amount of _____ from WSDOT by the Prime Consultant, for services provided from _____ to _____. In addition, the Prime Consultant certifies that payment was made to the sub-consultant on _____ for services provided from _____ to _____ in the amount of _____. This certifies that the payment to the sub-consultant is in compliance with RCW 39.04.250 and RCW 39.76.011 regarding the State's prompt payment laws. If payment to the sub-consultant was not made within 10 days of receipt of payment from WSDOT to the Prime, please attach on a separate sheet, the reason for delay in payment to the sub-consultant.

Prime Consultant

Sub-Consultant

Firm Name:

Firm Name:

Fed Tax ID Number:

Fed Tax ID Number:

Signature:

Signature:

Title:

Title:

NOTE: A separate form must be completed for each sub-consultant. Also, if the sub-consultant worked on multiple task orders, a separate form must be completed for each task order. Please send a cc to the appropriate Regional / Divisional Area Consultant Liaison.

Please return this signed certification to:

Director, Consultant Services
WSDOT HQ Consultant Services Office
PO Box 47323
Olympia, WA 98504-7323